



KAISER PERMANENTE[®]

**RIVERSIDE MEDICAL CENTER CLINICAL LABORATORY
MEDTOX SCAN PROFILE-V DRUG SCREEN DAILY QC LOG**

MONTH: _____ YEAR: _____

Current Kit Lot/Expirations

Lot# _____
Exp _____

INSTRUMENT IR #	106431 (UDS#1)	106427 (UDS#2)
Negative Control	Positive Control	
Lot# _____	Lot# _____	
Shelf exp _____	Shelf exp _____	
Open Exp _____	Open Exp _____	

New Kit Lot/Epiration

Lot# _____
Exp _____
Date in use _____

New Negative Control	New Positive Control
Lot# _____	Lot# _____
Shelf exp _____	Shelf exp _____
Open Exp _____	Open Exp _____
Date in use _____	Date in use _____

SHIFT: DAY / EVE / NIGHT SHIFT

DATE:	UDS# 1 or 2	Positive QC OK?	Negative QC OK?	VALID (Y/N)	CLS
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					
11					
12					
13					
14					
15					
16					

DATE:	UDS# 1 or 2	Positive QC OK?	Negative QC OK?	VALID (Y/N)	CLS
17					
18					
19					
20					
21					
22					
23					
24					
25					
26					
27					
28					
29					
30					
31					